

COVID-19 Update

We are experiencing extremely high call volume related to COVID-19 vaccine interest. Please understand that our phone lines must be clear for urgent medical care needs. **We are unable to accept phone calls to schedule COVID-19 vaccinations at this time. When this changes, we will update this web site. Please know that our vaccine supply is extremely small.** Read all [COVID-19 Vaccine Information](https://www.hopkinsmedicine.org/coronavirus/covid-19-vaccine/)

(<https://www.hopkinsmedicine.org/coronavirus/covid-19-vaccine/>).

[Patient Care Options](https://www.hopkinsmedicine.org/coronavirus/for-johns-hopkins-patients.html) (<https://www.hopkinsmedicine.org/coronavirus/for-johns-hopkins-patients.html>) | [Visitor Guidelines](https://www.hopkinsmedicine.org/coronavirus/visitor-guidelines.html) (<https://www.hopkinsmedicine.org/coronavirus/visitor-guidelines.html>) | [Coronavirus Information](https://www.hopkinsmedicine.org/coronavirus/index.html)

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Health

[Laminectomy](https://www.hopkinsmedicine.org/health)

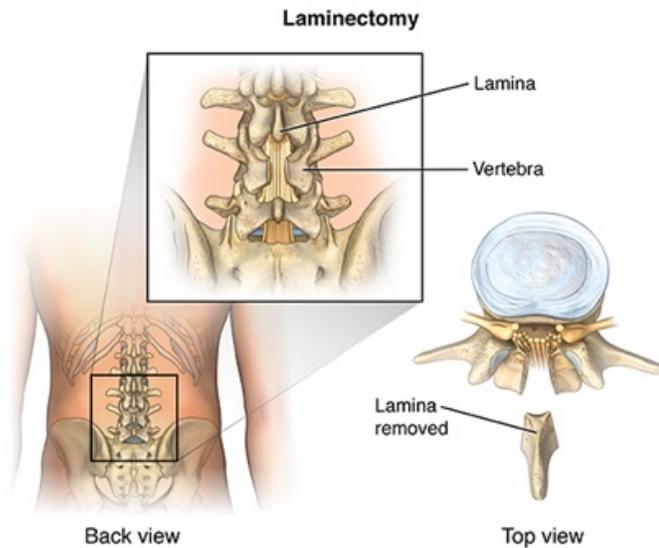
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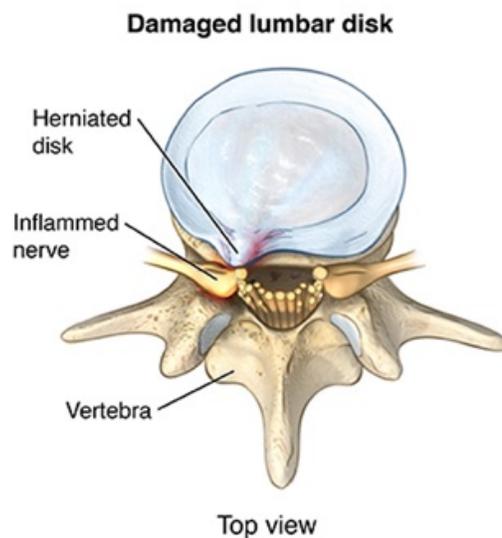
What is a laminectomy?

Back or neck pain that interferes with normal daily activities may need surgery for treatment. Laminectomy is a type of surgery in which a surgeon removes part or all of the vertebral bone (lamina). This helps ease pressure on the spinal cord or the nerve roots that may be caused by injury, herniated disk, narrowing of the canal (spinal stenosis), or tumors. A laminectomy is considered only after other medical treatments have not worked.



Why might I need a laminectomy?

Low back or neck pain can range from mild, dull, and annoying to persistent, severe, and disabling. Pain in the spine can restrict your ability to move and function. Laminectomy may be done to ease pressure on the spinal nerves, treat a disk problem, or remove a tumor from the spine.



One common reason for having a laminectomy is a herniated disk in the spine.

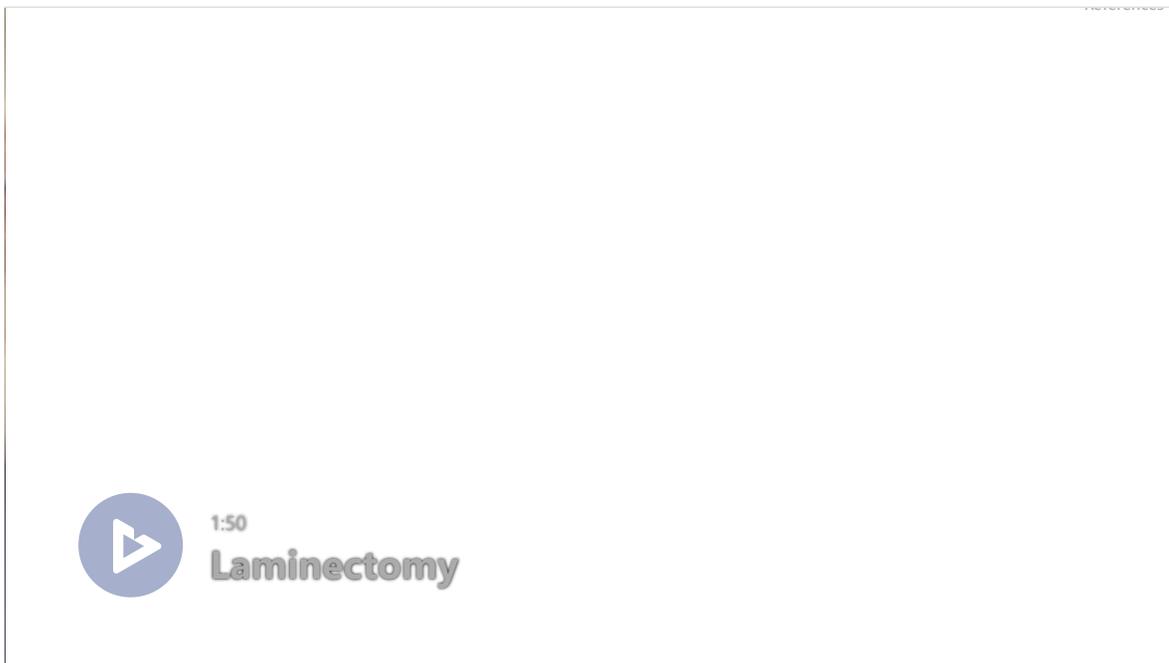
A disk may be displaced or damaged because of injury or wear and tear. When the disk presses on the spinal nerves, this causes pain, and sometimes numbness or weakness. The numbness or weakness will be felt in the body part where the nerve is involved, often the arms or legs. The most common symptom of a herniated disk is sciatica. This is a sharp, shooting pain along the sciatic nerve, extending from the buttocks to the thigh and down the back of the leg.

If medical treatments no longer work, surgery may be a choice. Some medical treatments for pain may include:

- Changes in activity
- Medicines, such as muscle relaxants, anti-inflammatory medicines, and pain relievers
- Spinal injections
- Physical rehabilitation, physical therapy, or both
- Occupational therapy
- Weight loss (if overweight)
- Smoking cessation
- Assistive devices, such as mechanical back supports

Laminectomy is usually done for back or neck pain that continues after medical treatment. Or it is done when the pain is accompanied by symptoms of nerve damage, such as numbness or weakness in the arms or legs. Loss of bowel or bladder control from pressure in the cervical or lumbar spine also usually needs surgery.

There may be other reasons for your healthcare provider to recommend a laminectomy.



What are the risks of a laminectomy?

As with any surgical procedure, complications can occur. Some possible complications may include:

- Bleeding
- Infection
- Blood clots in the legs or lungs

- Spinal cord or nerve root injury
- Risks linked to the use of general anesthesia

Nerve or blood vessels in the area of surgery may be injured. This can cause weakness or numbness. The pain may not be eased by the surgery or may become worse, although this is rare.

There may be other risks depending on your specific health condition. Be sure to discuss any concerns with your healthcare provider before the surgery.

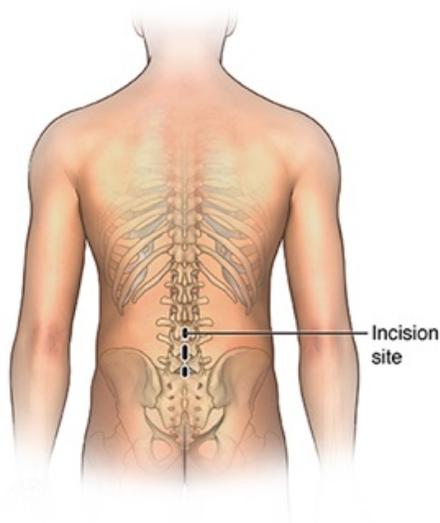
How do I get ready for a laminectomy?

- Your healthcare provider will explain the surgery to you and offer you the chance to ask any questions that you might have about the procedure.
- You will be asked to sign a consent form that gives your permission to do the surgery. Read the form carefully and ask questions if something is not clear.
- In addition to a complete health history, your healthcare provider may do a physical exam to make sure that you are in good health before undergoing the procedure. You may have blood tests or other diagnostic tests.
- Tell your healthcare provider if you are sensitive to or are allergic to any medicines, latex, tape, and anesthesia medicines (local and general).
- Tell your healthcare provider of all prescribed and over-the-counter medicines and herbal supplements that you are taking.
- Tell your healthcare provider if you have a history of bleeding disorders or if you are taking any blood-thinning (anticoagulant) medicines, aspirin, or other medicines that affect blood clotting. You may be told to stop these medicines before the procedure.
- If you are pregnant or think you could be, tell your healthcare provider.
- Follow any directions you are given for not eating or drinking before the surgery.
- You may get a sedative before the surgery to help you relax.
- You may meet with a physical therapist before your surgery to discuss rehabilitation.
- Certain activities may be limited after your surgery. Arrange for someone to help you for a few days with the household activities and driving.
- Based on your health condition, your healthcare provider may have other instructions for you.

Thoracic Disc Herniation: Pedro's Story

In 2017, Pedro could barely move. Other doctors told him he might never walk again. At Johns Hopkins, the message was different.

Lumbar laminectomy incision



What happens during a laminectomy?

A laminectomy usually requires a stay in a hospital. Procedures may vary depending on your condition and your doctor's practices.

A laminectomy may be done while you are asleep under general anesthesia. Or it may be done while you are awake under spinal anesthesia. If spinal anesthesia is used, you will have no feeling from your waist down. Newer techniques are being developed that may allow a laminectomy to be done under local anesthesia as an outpatient. Your doctor will discuss this with you in advance.

Generally, a laminectomy follows this process:

You will be asked to remove clothing and will be given a gown to wear.

An IV (intravenous) line may be started in your arm or hand.

Once you are under anesthesia, a urinary drainage catheter may be inserted.

If the surgical site is covered with extra hair, the hair may be clipped off.

You will be positioned either on your side or belly on the operating table.

The anesthesiologist will continuously watch your heart rate, blood pressure, breathing, and blood oxygen level during the surgery.

The healthcare staff will clean the skin over the surgical site with an antiseptic solution.

The surgeon will make a cut (incision) over the selected vertebra.

The surgeon will spread the muscles apart.

The surgeon removes the bony arch of the posterior part of the vertebra (lamina) to ease the pressure on the nerves in the area. This may involve removing bone spurs or growths, or removing all or part of a disk.

In some cases, spinal fusion may be done at the same time. During a spinal fusion, the surgeon will connect 2 or more bones in your spine.

The incision will be closed with stitches or surgical staples.

A sterile bandage or dressing will be applied.

What happens after a laminectomy?

In the hospital

After the surgery, you will be taken to the recovery room for observation. Once your blood pressure, pulse, and breathing are stable and you are alert, you will be taken to your hospital room. Laminectomy usually requires that you stay in the hospital one or more days.

You will most likely start getting out of bed and walking the evening of your surgery. Your pain will be controlled with medicines so that you can take part in the exercise. You may be given an exercise plan to follow both in the hospital and after discharge.

At home

Once you are at home, it's important to keep the surgical incision area clean and dry. Your healthcare provider will give you specific bathing instructions. The surgical staples or stitches are removed during a follow-up office visit.

Take a pain reliever for soreness as recommended by your healthcare provider. Aspirin or certain other pain medicines may increase the chance of bleeding. Be sure to take only recommended medicines.

Tell your healthcare provider about any of the following:

- Fever
- Redness, swelling, bleeding, or other drainage from the incision site
- Increased pain around the incision site
- Numbness in your legs, back, or buttocks
- Trouble urinating or loss of control of your bladder or bowel

Don't drive until your healthcare provider tells you it's OK. Don't bend over to pick up objects or arch your back. Your provider may tell you to limit other activities.

Your healthcare provider may give you other instructions after the procedure, depending on your particular situation.

Next steps

Before you agree to the test or the procedure make sure you know:

- The name of the test or procedure
- The reason you are having the test or procedure
- What results to expect and what they mean
- The risks and benefits of the test or procedure
- What the possible side effects or complications are
- When and where you are to have the test or procedure
- Who will do the test or procedure and what that person's qualifications are
- What would happen if you did not have the test or procedure
- Any alternative tests or procedures to think about
- When and how will you get the results
- Who to call after the test or procedure if you have questions or problems
- How much will you have to pay for the test or procedure

Request an Appointment

Maryland 410-955-5000

Outside of Maryland 855-695-4872

International +1-410-502-7683

Related

[5 Questions to Answer Before Considering Sciatica Surgery](https://www.hopkinsmedicine.org/health/conditions-and-diseases/back-pain/5-questions-to-answer-before-considering-sciatica-surgery)

(<https://www.hopkinsmedicine.org/health/conditions-and-diseases/back-pain/5-questions-to-answer-before-considering-sciatica-surgery>).

[Lumbar Disk Replacement](https://www.hopkinsmedicine.org/health/treatment-tests-and-therapies/lumbar-disk-replacement)

(<https://www.hopkinsmedicine.org/health/treatment-tests-and-therapies/lumbar-disk-replacement>).

[Minimally Invasive Lumbar Discectomy](https://www.hopkinsmedicine.org/health/treatment-tests-and-therapies/minimally-invasive-lumbar-discectomy)

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